#### Message

From: Corbett, Kate (DPH) [/O=COMMONWEALTH OF MASSACHUSETTS/OU=MASSMAIL-

01/CN=RECIPIENTS/CN=KATE.CORBETT]

**Sent**: 4/30/2012 7:17:31 PM

To: Zanolli, Janice (DPH) [/O=COMMONWEALTH OF MASSACHUSETTS/OU=MassMail-

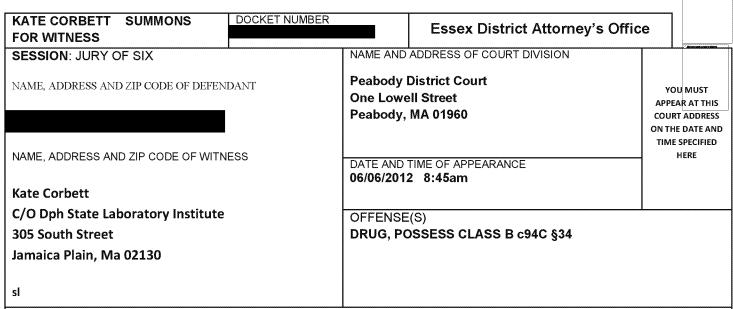
01/cn=Recipients/cn=Janice.Zanolli]

**Subject**: FW: Summons 6/6 JT

From: Lane, Shelly (EAS)

Sent: Monday, April 30, 2012 2:55 PM

**To:** Corbett, Kate (DPH) **Subject:** Summons 6/6 JT



## TO ANY PERSON AUTHORIZED TO SERVE CRIMINAL PROCESS IN THE COMMONWEALTH:

You are hereby commanded to forthwith serve the annexed summons upon the witness named within by delivering it to the witness personally, or by leaving it at the dwelling house or usual place of abode of the witness with some person of suitable age and discretion then residing therein, or by mailing it to the last known address of the witness.

NOTE: A summons for a witness may also be served by any person authorized to serve a summons in a civil action. See Rule 17(d)(1) of the Massachusetts Rules of Criminal Procedure.

### TO THE ABOVE NAMED WITNESS:

You are hereby ordered to appear in this Court on the appearance date noted above to give evidence and testify on behalf of the Commonwealth in the matter described above, and to appear from time to time and day to day thereafter as ordered. You are further required to bring with you:

LAB NUMBER CONTACT : 978-532-4140

#### **WARNING TO WITNESS:**

Failure to appear in accordance with this summons may result in the issuance of a warrant for your arrest. PLEASE BRING THIS DOCUMENT WITH YOU TO COURT.

ATENCION:

# Esta es una notificación oficial de la corte. Si usted no sabe leer inglés, obtenga traducción!

	District Attorney	Date Issued	
WITNESS:	Jonathan W. Blodgett	04/30/2012	
☐ Delivering a ☐ Leaving a consuitable age ☐ Mailing a con ☐ I received the	nat I served the within summons upon the copy of it personally to the witness. py of it at the dwelling house or usual pla and discretion residing therein. by of it to the last known address of the we summons on	nce of abode of the witness	with a person of
DATE OF SERVICE	SIGNATURE OF PERSON MAKIN	IG SERVICE T	TITLE OF PERSON MAKING SERVICE